

U.S. Department of Homeland Security U.S. Immigration and Customs Enforcement Office of Professional Responsibility Inspections and Detention Oversight Division Washington, DC 20536-5501

# Office of Detention Oversight Follow-Up Compliance Inspection

# Enforcement and Removal Operations ERO San Antonio Field Office

Karnes County Residential Center Karnes City, Texas

May 17-20, 2021

#### FOLLOW-UP COMPLIANCE INSPECTION of the KARNES COUNTY RESIDENTIAL CENTER Karnes City, Texas

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### FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead Contractor Contractor Contractor Contractor ODO Creative Corrections Creative Corrections Creative Corrections Creative Corrections

### FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Karnes County Residential Center (KCRC) in Karnes City, Texas, from May 17 to 20, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO's last inspection of KCRC from January 11 to 14, 2021. The facility opened in 2012 and is owned and operated by the GEO Group. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KCRC in 2012 under the oversight of ERO's Field Office Director (FOD) in San Antonio (ERO San Antonio). The facility operates under the Family Residential Standards (FRS) 2020.

ERO San Antonio has assigned deportation officers to the facility. A KCRC administrator handles daily facility operations and manages support personnel. The GEO Group provides food services and medical care at the facility. In February 2020, KCRC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	830
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of May 17, 2021)	
Female Detainee Population (as of May 17, 2021)	

During its last inspection, in Fiscal Year (FY) 2021, ODO found zero deficiencies.

<sup>&</sup>lt;sup>1</sup> This facility holds female residents and male and female children with low-security classification levels for periods longer than 72 hours.

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List Report as of May 17, 2021.

<sup>&</sup>lt;sup>3</sup> Ibid.

## FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

Follow-Up Compliance Inspections focus on facilities that changed their contractually required ICE National Detention Standards (i.e., from NDS 2000 to NDS 2019) following their first ODO inspection of the FY. ODO will conduct a complete review of several core standards, in accordance with the facility's new contractually required ICE National Detention Standards, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (FRS only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's Uniform Corrective Action Plan, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

#### FINDINGS BY FAMILY RESIDENTIAL STANDARDS 2020 MAJOR CATEGORIES

FRS 2020 Standards Inspected <sup>4</sup>	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Funds and Personal Property	0
Use of Physical Control Measures and Restraints	0
Sub-Total	0
Part 3 – Order	
Discipline and Behavioral Management	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Health Care	0
Health Care (Females)	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 – Activities	
Educational Policy	0
Sub-Total	0
Total Deficiencies	0

<sup>&</sup>lt;sup>4</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

## **DETAINEE RELATIONS**

ODO interviewed 12 residents, who each voluntarily agreed to participate. None of the residents made allegations of discrimination, mistreatment, or abuse. Most residents reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct resident interviews via video teleconference; however, ERO San Antonio and the facility were not able to accommodate this request due to technology issues. As such, the resident interviews were conducted via telephone.

*Admission and Release:* One resident stated she received the ICE National Detainee Handbook and the KCRC resident handbook during the intake process. However, one of the handbooks was in English and the other in Creole. The resident stated she did not understand the handbook in English provided by the facility.

• <u>Action Taken</u>: On May 18, 2021, ODO interviewed the facility chief of intake and found the facility did not issue an ICE National Detainee Handbook to the resident. However, the chief of intake confirmed the resident did receive the KCRC Resident Handbook in English. The facility staff provided the residents with language line assistance when applicable. Additionally, the chief of intake stated the resident received a Creole translation of the facility orientation packet, the staff's condensed version of the resident handbook.

*Recreation:* Eight out of 12 residents interviewed stated they did not receive recreational time at the facility.

• <u>Action Taken</u>: On May 18, 2021, ODO reviewed the KCRC Resident Handbook and the waiver for Family Residential Standards During Quarantine and 72-hour Posture and spoke with the facility compliance administrator. ODO found the facility's 72-hour mission statement and approved waiver allow outdoor recreation for residents when operationally feasible. The compliance administrator told ODO the facility provided the residents with in-house activities such as arts and crafts and exercise videos due to the COVID-19 pandemic.

# FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

There were no findings during this inspection.

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under FRS 2020 and found the facility in compliance with all 12 of those standards. ODO commends the center staff for their responsiveness during the inspections.

Compliance Inspection Results Compared	First FY 2021 (FRS 2020)	Second FY 2021 (FRS 2020)
Standards Reviewed	20	12
Deficient Standards	0	0
Overall Number of Deficiencies	0	0
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0